

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS | | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | minus 20 = | |
| INDEPENDENT CLAIMS | minus 3 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

| SMALL ENTITY TYPE | OTHER THAN OR SMALL ENTITY |
|-------------------|----------------------------|
| RATE | FEES |
| BASIC FEE | 150.00 |
| OR | BASIC FEE |
| X\$ 25= | 300.00 |
| OR | X\$50= |
| X100= | |
| OR | X200= |
| +180= | |
| OR | +360= |
| TOTAL | OR TOTAL |

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 20 | Minus | 20 |
| Independent | 2 | Minus | 3 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| SMALL ENTITY | OTHER THAN SMALL ENTITY |
|-------------------------|----------------------------|
| RATE | ADDITIONAL FEE |
| X\$ 25= | |
| OR | X\$50= |
| X100= | |
| OR | X200= |
| +180= | |
| OR | +360= |
| TOTAL ADDIT. FEE | OR TOTAL ADDIT. FEE |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | Minus | 20 | = |
| Independent | Minus | 3 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| AMENDMENT B | RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
|-------------------------|------|----------------|----------------------------|----------------|
| X\$ 25= | | | X\$50= | |
| X100= | | | X200= | |
| +180= | | | +360= | |
| TOTAL ADDIT. FEE | | | OR TOTAL ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | Minus | 20 | = |
| Independent | Minus | 3 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| AMENDMENT C | RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
|-------------------------|------|----------------|----------------------------|----------------|
| X\$ 25= | | | X\$50= | |
| X100= | | | X200= | |
| +180= | | | +360= | |
| TOTAL ADDIT. FEE | | | OR TOTAL ADDIT. FEE | |

- * If no entry in column 1, enter "0" in column 2.
- * If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".
- * If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.